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| Substitute for form 1449B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT | | | | Complete if Known | |
| | | | | Application Number | |
| | | | | Filing Date | |
| | | | | First Named Inventor | Udayan Kanade |
| | | | | Group Art Unit | |
| | | | | Examiner Name | |
| Sheet | 1 | of | 1 | Attorney Docket No | COT-003 |

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| EXAMINERS SIGNATURE | | DATE CONSIDERED | |
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| DATE CONSIDERED | |
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